Assistance Dog Application Form

applicant

ABN: 65 952 882 314

Glen Eira City Council Customer Service Centre

© Corner Glen Eira and Hawthorn Roads, Caulfield

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Section one: Details of dog owner/handler					
In this section you will	need to pr	ovide the d	etails of th	e dog owne	r/handler
Title	□Mr	☐ Mrs	□Ms	Miss	Other:
First name					
Surname					
Date of birth (DD/MM/YYYY)		/		/	
Contact number					
Email address (required)					
Postal address (if different from above)					
Parent or guardia	an detai	ls			
Where the owner/hand need to be provided be		assistance o	dog is unde	er the age of	18, the details of the parent or guardian wi
Title	□Mr	□Mrs	□Ms	☐ Miss	Other:
First name					
Surname					
Address (if different to above)					
Contact number					
Relationship to					

Section two: Details of assistance dog

In this section you will need to provide the details of the dog and training it has received

Dogs name					
Date of birth (DD/MM/YYYY)	/ /	ı			
Breed					
Colour					
Sex	☐ Male ☐ Fer	☐ Male ☐ Female			
Microchip number *attach a copy of the microchip certificate					
Is the dog a declared dangerous, me	enacing or restricted breed dog?	☐ Yes	 П No		
Is the dog over 12 months of age?	☐ Yes				
Is the dog desexed?		 No			
Has the dog been trained to perforn person with a disability to alleviate th	Yes	□ No			
Please provide the details of the person or organisation that trained your dog to be an assistance dog. Note: a person may self-train their dog to assist in alleviating the effects of their disability.					
Trainer's full name					
Company name					
Contact number					
Email					
Qualifications					
Has the dog completed obedience training provided by a dog trainer, either separately, or as part of, the training undertaken to perform tasks or functions that assist the person with a disability to alleviate the effects of his or her disability? *attach a copy of the obedience certificate		☐ Yes	□ No		
Date obedience training was completed					

Section three: Dog trainer declaration This section will need to be completed by the dog trainer upon successful completion of obedience training. An independent dog trainer who holds the relevant qualification. A qualified dog obedience trainer from a dog obedience training organisation approved under the Domestic Animals Act 1994. Trainer's full name Company/organisation Contact number Email Certificate III in Dog Behaviour and Training Qualifications Certificate IV in Companion Animal Services Handler's name Dog's name Date of training completion I declare that the following is true and accurate: The handler keeps the dog under effective control at all times The dog is responsive to a handler's obedience commands The dog walks to heel with a handler, without sniffing, marking or wandering The dog does not exhibit inappropriate aggressive behaviour, e.g. growling, biting, raising hackles, showing teeth The dog does not exhibit anxiety, stress, fear, or undue excitement when in public places The dog displays standards of hygiene appropriate for a public place I have read all the relevant information contained within this form, and verify that it is correct to the best of my knowledge I am not the applicant.

_____ (applicant's name) application for a registration fee

exemption for _____ (name of dog) as an 'assistance dog' as defined under the Equal

Opportunity Act 2010 and believe the dog is suitably trained and has appropriate behaviour for performing in the

I support ___

capacity of an 'assistance dog' in public places.

Signed: _____

Section four: Health professional declaration

This section is to be completed by a health professional.

I am currently practicing as a	 □ Psychologist/psychiatrist □ Physiotherapist/osteopath □ Specialist (specify): □ Other allied health professional (specify): 		
Health professional's name			
Handler's name			
Duration of treatment			
I declare that:			
I am not the applicant or an immediate family member of the applicant			
• I have read all the relevant information contained within this form, and verify that it is correct to the best of my knowledge			
• I verify that the applicant has a disability and will require the services of an assistance dog to alleviate the effects of their disability.			
Signed:	Date:		
AHPRA registration number			
Professional stamp (must include name and address			

Changes to this declaration can only be made by the health professional and must be accompanied by their signature (not initials) and professional stamp.

Section five: Assistance dog registration fee exemption terms and conditions

It important that you understand the terms and conditions of the registration fee exemption for assistance dogs before you apply.

The Commonwealth Disability Discrimination Act 1992 and Victoria's Equal Opportunity Act 2010 protect people with disabilities from discrimination. This includes protection from discrimination because a person has an assistance dog. The registration fee exemption does not provide further protections or access rights for assistance dogs, it only entitles an assistance dog to a registration fee exemption with council.

To be eligible for the assistance dog registration fee exemption, it is a requirement that your dog is not:

- A declared dog (menacing or dangerous)
- A restricted breed
- Younger than 12 months of age.

Your assistance dog must be both obedience trained and trained to alleviate the effects your disability.

Obedience training must be provided by a dog trainer, where:

Dog trainer means a person who:

- Provides training at a dog obedience training organisation approved under section 5B of the Domestic Animals Act 1994 and/or
- Has a Certificate III in Dog Behaviour and Training or Certificate IV in Companion Animal Services

Obedience training means a training program that assesses an assistance dog in the following:

- Heeling or walking with a dog handler, without sniffing, marking or wandering
- Sociability with other dogs
- Responsiveness to a dog handler's commands, including staying on command (known as a stay test) and coming to a dog handler on command (known as a recall test)
- Absence of aggression towards humans or other animals
- Absence of anxiety, stress, fear, or undue excitement when in public places
- Standard of hygiene appropriate for a public place

If you, as the owner/handler of the assistance dog, are convicted of two or more offences under the *Domestic Animals Act 1994* with respect to the same assistance dog, the assistance dog is no longer eligible for the zero registration fee and you will be required to pay the full registration fee.

It is understood that the applicant accepts the 'Assistance dog free registration terms and conditions' when submitting this application form.

Section six: Applicant/Guardian/Agent statement

The applicant or guardian/agent must sign the following.

By singing the below, I verify the following:

- certify that to the best of my knowledge the information in this application is correct I have a disability and I require the assistance of an assistance dog
- I accept that my medical practitioner and/or the trainer(s) of my assistance dog may be contacted to verify information provided in this application
- I understand and accept the terms and conditions set out above.

Signature of applicant or guardian/agent (must be 18 years and over)

Applicant or guardian/agent signature: Date (DD/MM/YYYY):	/ /		
If the applicant is under 18 years of age, or is unable to sign the application, the applicant's guardian/agent need to complete and sign the section below.			
Full name of guardian/agent:			
I declare that I have read and explained the contents of this application to the applicant and that the details set out for the applicant are correct.			
Full name of guardian/agent:			
Phone number:			

Privacy statement

The personal information on this form is required to include the dog or cat on the register administered by Council under the *Domestic Animals Act 1994*. This information is required under Section 10 of the *Act* and failure to provide the information may result in Council being unable to register your animal. The information is used by Council in connection with administration and enforcement of the *Act*, and may be disclosed to other councils. This information may be accessed by contacting Council's privacy officer on 9524 3333.

OFFICE USE ONLY

Checklist to approve the assistance dog registration:	
The dog is desexed	
The dog is at least 12 months of age	
The dog is not a dangerous dog, menacing dog, or a restricted breed dog	
Evidence of assistance dog training provided	
Evidence of obedience training provided, including a completed declaration from a dog trainer	
Completed declaration from an Allied Health Practitioner provided	